2.1.2 Policy Administration for Handbook of Operating Policies

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<th>Chapter 2 - General</th>
<th>Original Effective Date: January 2021</th>
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<tbody>
<tr>
<td>Section: Official Publications</td>
<td>Date Last Reviewed: December 2020</td>
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<tr>
<td>Responsible Entity: Institutional Compliance and Privacy Office</td>
<td>Date Last Revised: December 2020</td>
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I. Purpose

The purpose of this policy is to establish a framework through which UT Health San Antonio (University) policies are developed, amended, approved, published or retired in the Handbook of Operating Policies (HOP).

II. Scope

This policy applies to all new HOP policies approved after December 31, 2020, and to existing HOP policies as they are reviewed, amended, approved, or retired thereafter.

III. Policy

A. Policy Management

1. The University will develop and maintain HOP Policies in accordance with the University of Texas System (UT System) Board of Regents’ Rules and Regulations, federal and state laws and regulations, and accreditation and other governing standards necessary to support the University’s tradition of ethical and exemplary conduct in business and operational affairs.

2. Any individual employed or associated with the University may propose a new or amended policy by emailing a Policy Impact Statement form to the appropriate Responsible Executive and the Institutional Compliance and Privacy Office at compliance@uthscsa.edu.

3. Under the guidance of the Institutional Compliance and Privacy Office, the Responsible Executive is responsible to engage, as needed, subject matter experts to provide technical and/or legal review. Additionally, the Responsible Executive is responsible to vet the policy through all appropriate channels as necessary (e.g., Faculty and/or Staff Senate, Deans of affected schools; and or Department Chairs).

4. If during the pre-approval review of a new policy or amended policy, the Responsible Executive is notified of issues regarding content, the Responsible
Executive shall thoughtfully and in good faith attempt to reconcile all parties concerns. If unable to fully reconcile, the Responsible Executive is responsible to notify all policy approvers, in advance of approval motions, of the unresolved conflict.

5. The Institutional Compliance and Privacy Office will review and confirm that the appropriate steps to develop and review content is completed prior to the new or amended policy being submitted for final approval.

B. Policy Approval Authority

1. The Executive Committee is responsible to exercise approval authority for all new and amended policies prior to the policy being published or republished in the HOP.

2. The Institutional Compliance and Privacy Office will present to the Executive Committee all new or amended policies that have been properly vetted and approved by the Responsible Executive.

3. During State or Federally declared emergencies, the Office of the President, or an assigned delegate, may mandate and approve policies for the purposes of managing the on-set of risks caused by the immediate disaster. Emergency policies must be widely communicated. Within sixty (60) days following the end of the declared emergency, the Responsible Executive shall review and make recommendation to the Executive Committee as to whether the policy is to be approved for on-going business or is no longer needed and is to be retired.

4. The Institutional Compliance and Privacy Office, in consultation with the Responsible Executive, is authorized to apply discretionary edit changes without Executive Committee approval. Discretionary edit changes generally include; formatting, grammar, or punctuation corrections. Other discretionary edits are those that reflect organizational changes or provide added clarity. Such edits may not alter the original intentions of the HOP Policy. Material Policy Changes require Responsible Executive sponsorship to vet through appropriate channels and to present for Executive Committee approval.

C. Policy Accessibility and Organization

1. The HOP is the official repository for University Policies and is maintained by the Institutional Compliance and Privacy Office under the direction of the Director of Policy Governance. The official University HOP web page, (https://wp.uthscsa.edu/pao/hop/), provides access to the most recent approved version of University Policies.

2. To maintain an organized system of change control, departmental web sites shall refer directly to the HOP repository and shall not host separate copies of University Policies.
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Policies. This does not preclude departments from maintaining departmental protocols and procedures on their web sites, provided the departmental protocols are not identified as University Policies. In the event that a conflict arises between a HOP Policy and a departmental protocol, the University Policy shall prevail.

D. Policy Template

A standard University Policy Template has been adopted to ensure clarity and consistency in policy presentation. University HOP Policies will be maintained and formatted as described below:

1. Header information: (mandatory element) (a) University policy name, (b) HOP chapter and section number, (c) Responsible Entity, (d) Effective date, (e) Date of last review, and (f) Date last revised.

2. Purpose: (mandatory element) is a statement of philosophy, position, rule, regulation or direction that is consistent with mission, vision, and strategies of the University.

3. Scope: (mandatory element) Identifies parties to whom the policy applies. If applicable, describes circumstances in which the policy applies or does not apply. The Scope may also describe other conditions that trigger application of the policy.

4. Policy Statement: (mandatory element) Description of the actual policy covering topics which include: duties assigned to responsible parties and other parties as necessary; other information specific to a particular policy subject as needed; and a description of the compliance review process and specific authority to impose penalties or other remedies when noncompliance occurs, if applicable.

5. Definitions: (optional element) The meaning of terms not defined in-line with policy statements are to be described here.

6. Related References: (optional element) In this section, list (and hyperlink, if possible) any related policies, procedures, forms, guidelines, FAQs, training or other related resources.

7. Review and Approval History: (mandatory element) Document review frequency, review dates, modification dates, and approving authorities. University Policies are to be reviewed no less than once every three (3) years, and more often if so dictated by regulatory, accreditation, or other governing requirement. Also, indicate if policy requires approval by the UT System Board of Reagents or UT System Office of General Counsel.
IV. Definitions

When used in this document with initial capital letter(s), the following words have the meaning set forth below unless a different meaning is required by context.

**HOP Amendment**: A change made to the HOP, including the adoption of a new policy, revision to an existing policy, or retirement of a policy.

**HOP Policy Statement**: A governing statement and expected behaviors contained in the University’s Handbook of Operating Policies which support compliance with laws, or rules of the UT System; operational efficiency, mitigation of institutional risk, or the core mission and values of the University. The Institutional Policy website contains criteria used for HOP policies.

**HOP Policy Template**: The standardized format used for creating or revising a HOP policy.

**HOP Policy Impact Statement Form**: An initiating document to propose a HOP Amendment for a new policy or revision to an existing policy. It provides relevant policy related information addressing rationale, scope, and potential impact issues (resource, operational, financial, training).

**Material Policy Change**: A substantive edit to HOP policy content including changes to essential principle(s), scope, or application. This does not include changes which are: a) editorial, b) related to organizational reporting change, c) reformatting a policy or paragraph, d) updates to policy related contacts, tools, resources, and reference citations, e) made to bring clarity or grammar improvements, or f) do not materially change the intent of the policy.

**Responsible Executive**: is a senior department leader who officially advances and endorses a HOP policy. The individual responsible for assuring appropriate policy management of a specific HOP policy. The policy owner is considered a subject matter expert on the issue covered by the policy.

V. Related References

*To access and edit the Policy Template, (1) click link, (2) Select Edit Document, and (3) Open in Desktop Application (Word). The Impact Statement Form is a fillable PDF.*

2.1.2T Policy Template (Word)
VI. Review and Approval History

A. The approving authority of this policy is the University Executive Committee.

B. The review frequency cycle is set for three years following the last review date, a time period that is not mandated by regulatory, accreditation, or other authority.

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<th>Effective Date</th>
<th>Action Taken</th>
<th>Approved By:</th>
<th>Date Approved</th>
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<tr>
<td>1/1/2021</td>
<td>Approved Rewrite</td>
<td>Executive Committee by electronic vote</td>
<td>12/2020</td>
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